PATENT APPLICATION FEE DETERMINATION RECUI	HU
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Effective October 1, 2000

Application or Docket Number

PHN2-0002	175
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CLAIMS AS FILED - PART (Column 1)			(Column 2)			SMALL ENTITY TYPE		OTHER THAN				
TOTAL CLAIMS		10				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			16 minus 20=		. /			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS .			2 minus 3 =					X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT				1/12	Ø		+135=	-	OR	+270=	970	
* If the difference in column 1 is less than zero, enter *0* in					"0" in c	olumn 2	L	TOTAL		OR	TOTAL	980
8 55 64 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total >	. 10	Minus	- 3	20.	=		X\$ 9=		OR	X\$18=	
ME	Independent	•. 2	Minus	••• (3	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+135=		OR	+270=	
							L	TOTAL LODIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
N B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	HATE	ADDI- TIONAL FEE
OME.	Total	. 10	Minus	2	0	-		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	· 3	Minus	ج ۰۰۰	3 (1-	11	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE	DEPENDEN	CLAIM		┛╽	+135=		OR	+270=	,
		Best Av	vaila) eldc	Cop	y '	į.	TOTAL		OR	YOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)											
NTC		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA][RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N Q	Total		Minus			3		X\$ 9=		OR	X\$18=	
AMENDMEN	Independent		Minus			Ŀ	11	X40=		OR	X80=	
الـُ	FIRST PRESE	NTATION OF M	ULTIPLE	DEPENDEN	IT CLAIN		4	+135=		OR	+270=	
* If the entry in column 1 is tess than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							٠. ا	TOTAL		OR	TOTAL	
:	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "30." ADDIT. FEE											